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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 09/913329 FILING DATE APPLICANT(S)

1-6-03 2-27-04 CLAIMS

Table with columns for AS FILED, AFTER 1st AMENDMENT, AFTER 2nd AMENDMENT, and rows numbered 1-130. Includes sub-totals for INDEPENDENT and DEPENDENT claims.

BEST AVAILABLE COPY

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

